

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | Bm | | 08-28-01 |
| O.I.P.E. CLASSIFIER | | 21 | 9/4/01 |
| FORMALITY REVIEW | AT | 1071 | 09/26/01 |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|------|
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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